

<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN  PATENT APPLICATION</b>  <input checked="" type="checkbox"/> Declaration <input type="checkbox"/> Declaration Submitted with      Submitted after Initial Initial Filing      Filing (surcharge 37 CFR 1.16(e) required)	Attorney Docket No.	GPH-003I
	First Named Inventor	Orbanes
	<b>COMPLETE IF KNOWN</b>	
	Application Serial Number	Not yet assigned
	Filing Date	Herein
	Group Art Unit	Not yet assigned
	Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR CREATING CUSTOM FORMATS FOR VIEWING INFORMATION IN VIRTUAL SPACE

(Title of the Invention)

the specification of which

☒ is attached hereto  
OR

☐ was filed on  
(MM/DD/YYYY)

as United States Application Serial Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.
60/182,326	2/14/2000	
60/182,368	2/14/2000	
60/240,287	10/13/2000	
Not yet assigned, Attorney Docket Number GPH-003PR2	11/16/2000	

**DECLARATION – Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

**U.S. Parent Application or PCT Parent  
Serial Number**

**Parent Filing Date  
(MM/DD/YYYY)**

**Parent Patent Number  
(if applicable)**

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label Here

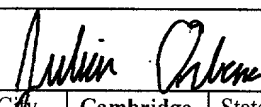
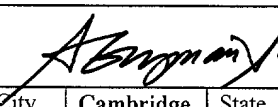
Name	Registration Number	Name	Registration Number
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Steven M. Bauer	31,481	Thomas C. Meyers	36,989
Elias C. Behrakis	P-47,416	Joseph B. Milstein	42,897
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Isabelle A.S. Blundell	43,321	Ronda P. Moore	44,244
Maureen A. Bresnahan	44,559	Indranil Mukerji	P-46,944
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Jennifer A. Camacho	43,526	Michael A. Rodriguez	41,274
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John J. Cotter	38,116	R. Stephen Rosenholm	45,283
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Kia L. Freeman	P-47,577	Joseph P. Sullivan	45,349
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Danielle L. Herritt	43,670	Gerald E. Worth	45,238
Douglas J. Kline	35,574	Yin P. Zhang	44,372
John D. Lanza	40,060		

☐ Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:

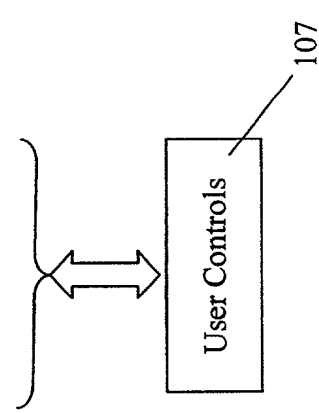
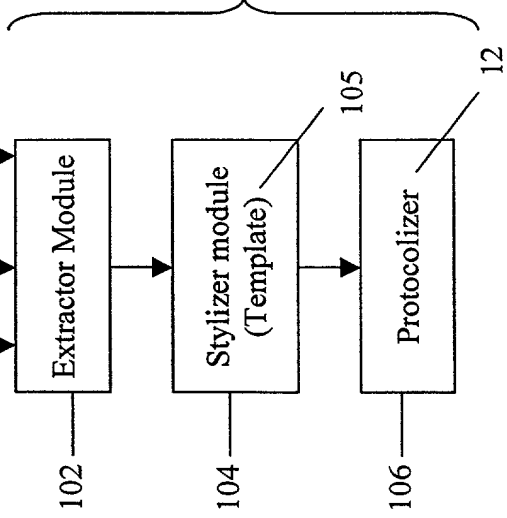
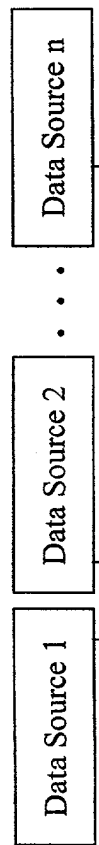
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Julian				Orbanes				
Inventor's Signature					Date		Feb 14, 2002	
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Mailing Address (ln. 2)	City	Cambridge	State	MA	ZIP	02139	Country	USA
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.								
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Inventor's Signature					Date		Feb. 14, 2001	
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Given Name (first and middle [if any])				Family Name or Surname				
Inventor's Signature					Date			
Residence	City		State		Country		Citizenship	
Mailing Address								
Mailing Address (ln. 2)	City		State		ZIP		Country	

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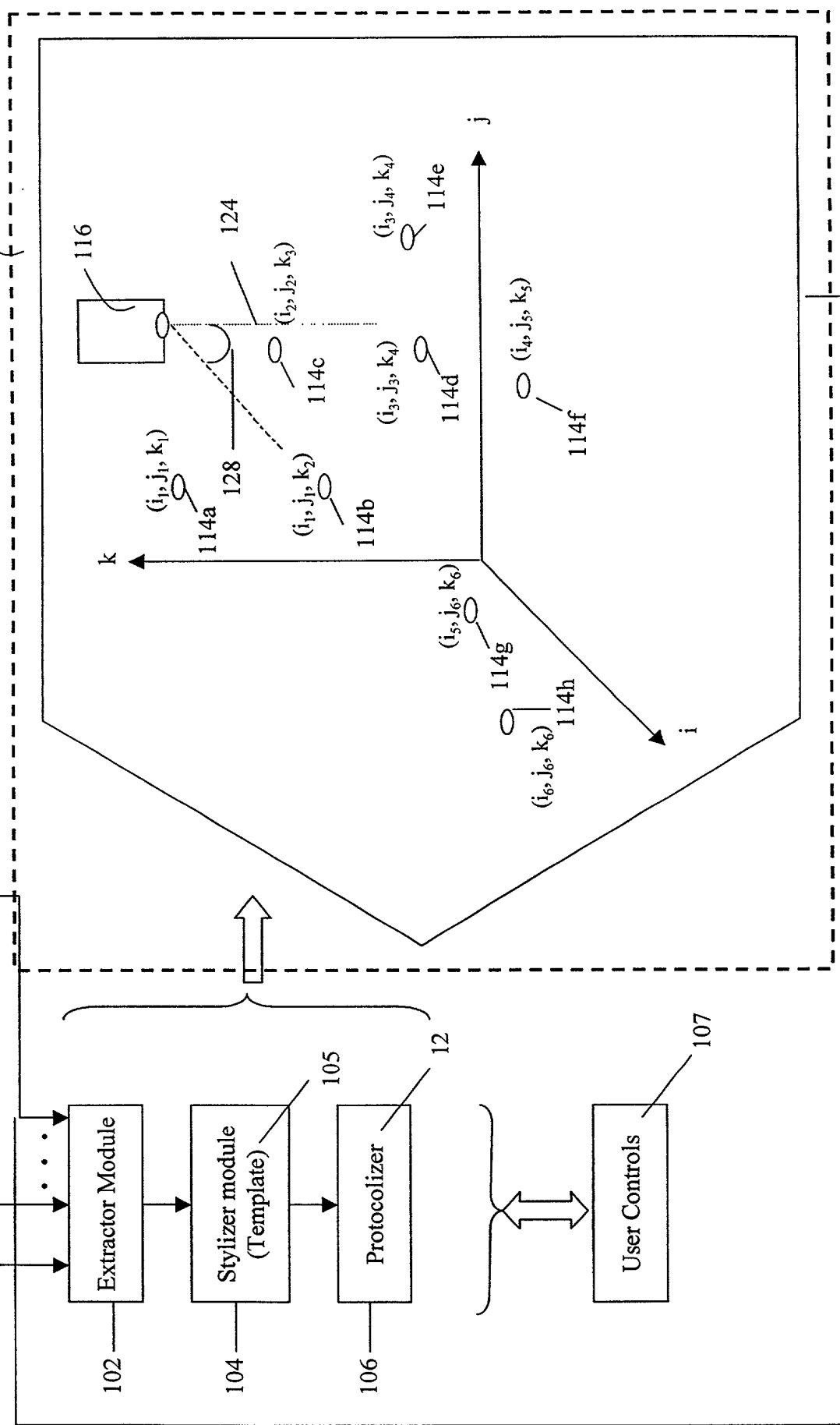


FIGURE 1

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## FIGURE 2